



Application for Sewer Permit

7800 Golden Valley Road, Golden Valley, MN 55427-4588
Phone: (763) 593-8090 Fax: (763) 593-3997 TTY: (763) 593-3968

Date _____ Permit No. _____

Site Address _____	Suite # _____
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Applicant: Owner _____ Contractor _____

Property Owner	Name/Company _____ Phone: _____
	Address _____
	City _____ State _____ Zip _____
Contractor	Company _____
	Address _____ City _____
	State _____ Zip _____ Phone: _____
	Fax: _____ Email _____
	Contact Person _____ Cell: _____
	Contractor License # _____ Expiration Date _____

Sewer & Water (SW)	<input type="checkbox"/> 27 - Storm Sewer <input type="checkbox"/> 28 - Sanitary Sewer
Permit Type:	(Storm Sewer and Sanitary Sewer are separate permits.)
Work Type:	<input type="checkbox"/> 75-New To Stub <input type="checkbox"/> 71-New With Tap <input type="checkbox"/> 72-Cut-off/Stub <input type="checkbox"/> 72-Cut-off/Main <input type="checkbox"/> 83-Repair <input type="checkbox"/> 84-PMP Sanitary Sewer Service <input type="checkbox"/> 85-POS/INI Sanitary Sewer Repair <input type="checkbox"/> 81-Remodel/Alter
Office Use Required Inspections	<input type="checkbox"/> 01 - Rough-In (Air Test) <input type="checkbox"/> 13 - Visual <input type="checkbox"/> 98 - Other

Storm: Pipe Size _____ Pipe Length _____ Pipe Material: _____

Sanitary: Pipe Size _____ Pipe Length _____ Pipe Material: SCH 40 PVC _____

(APPROVED CONTRACTORS ONLY) LINER/TYPE _____

Estimated Value of Work \$ _____

Total Permit Fee \$ _____

Office Use Only	Fees
Storm Sewer	\$ _____
Sewer Tap	\$ _____
Sanitary Sewer	\$ _____
Sanitary Tap	\$ _____
Cut off	\$ _____
Driveway Cover/Misc	\$ _____
Surcharge	\$ _____
Total Fees	\$ _____

*** (OVER) ***

This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Golden Valley to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Golden Valley and the State of Minnesota.

Applicant's Signature

Date

**Y N The Minnesota Department of Labor and Industry must review sewer/water designs
for Public Buildings NOT all within private property before the City of Golden Valley
can approve the sewer/water permits.**

Date of Approval _____

Y N Do soil conditions require an engineered support detail?

Permit Approved By:

CITY ENGINEER

DATE _____

CHIEF BUILDING INSPECTOR

DATE _____

THIS PROJECT IS: ___ POS/I&I
 ___ PMP
 ___ GENERAL

COMMENTS _____

G:\SEWER\PERMITAPPLICATION (01/01/11)



This document is available in alternate formats upon a 72-hour request. Please call 763-593-8006 (TTY: 763-593-3968) to make a request. Examples of alternate formats may include large print, electronic, Braille, audiocassette, etc.

